

re Application of:

Boot et al.

Serial No.: 10/046,671

Filed: January 14, 2002

For: MOSAIC INFECTIOUS BURSAL

DISEASE VIRUS VACCINES

Confirmation No.: 9315

Examiner:

Group Art Unit: 1642

Attorney Docket No.: 2183-5238US

CERTIFICATE OF MAILING

I hereby certify that this correspondence along with any attachments referred to or identified as being attached or enclosed is being deposited with the United States Postal Service as First Class Mail on the date of deposit shown below with sufficient postage and in an envelope addressed to the Commissioner for Patents, Washington, D.C. 20231.

January 7, 2003

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Lynette Eliason
Name (Type/Print)

REQUEST FOR CORRECTED FILING RECEIPT

Application Processing Division Customer Correction Branch Commissioner for Patents Washington, D.C. 20231

Sir:

Attached is a copy of the official filing receipt received from the PTO in the above application. Issuance of a corrected filing receipt in accordance with the annotations on the attached filing receipt copy is respectfully requested.

The errors to be corrected are as follows:

In the "Drawings" section change "38" to --49--.

Serial No.: 10/046,671

These corrections are not due to any errors by Applicants and no fee is due.

Respectfully submitted,

Allen C. Turner

Registration No. 33,041 Attorney for Applicant(s)

TRASKBRITT P.O. Box 2550

Salt Lake City, Utah 84110-2550

Telephone: 801-532-1922

Date: January 7, 2003

ACT/le:blh

Enclosure: Copy of Official Filing Receipt with annotations correcting errors \\Traskbritt1\Shared\DOCS\2183-5238US\25266.doc







Commissioner for Patents Washington, DC 20231 www.uspto.gov

 APPLICATION NUMBER
 FILING DATE
 GRP ART UNIT
 FIL FEE REC'D
 ATTY.DOCKET.NO
 DRAWINGS
 TOT CLAIMS
 IND CLAIMS

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24247 TRASK BRITT P.O. BOX 2550 SALT LAKE CITY, UT 84110 RECEIVED NOV 1 8 2002 Trask Britt CONFIRMATION NO. 9315
UPDATED FILING RECEIPT
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Date Mailed: 11/13/2002

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Hendrik Johannis Boot, Amersfoort, NETHERLANDS; Anna Agnes, H., M. Ter Huurne, Lelystad, NETHERLANDS; Bernardus Petrus, H. Peeters, Lelystad, NETHERLANDS;

Domestic Priority data as claimed by applicant

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Foreign Applications

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Early Publication Request: No

Title

Mosaic infectious bursal disease virus vaccines